

SFA/School District: _____

LEA #: _____

P2 CEP
Charter

Area Specialist

Child Nutrition Renewal Agreement & Policy Statement Checklist 2017-2018**Return the following materials to Child Nutrition Unit by May 12, 2017:**

2 Original Copies	Original Signatures of:		CNU use only		CNU Notes:
			Complete	NA	
One copy of this Checklist (yellow/salmon/blue)					
Renewal of Agreement (green)	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND			
CN Program Schedule A (Completed by SFA/LEA)	<input type="checkbox"/> Menu Planner and/or	<input type="checkbox"/> CND			
<i>Each school information completed and Schedule A signed by CND and/or Menu Planner</i>					
Agreement Attachments / Assurances: (green)					
Menu Planning Attestation	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND			
Health Inspection Report		<input type="checkbox"/> CND			
Wellness Attestation	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND			
Civil Rights Attestation	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND			
Attestation Statements	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND			
Renewal of Policy Statement	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND			
Policy Statement Attachments: (white)					
Meal Count and Collection					
Free and Reduce Materials Attestation	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND			
Distribution of Application Materials Checklist	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND			
Child Nutrition Contacts and Appeals Hearing Attestation	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND			
Forms and Letters (return only if changes are made to prototype)					
<i>If applicable also return 2 original copies:</i>					Revised Applications Yes No
Changes to Forms and Letters (including scanned applications)					Revised Letters Yes No
Afterschool Snack Schedule B (purple)	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND			To SS
Seamless Summer Option Schedule C-18 (pink)	<input type="checkbox"/> Superintendent	<input type="checkbox"/> CND			To SS

ALL OF THE ABOVE MUST HAVE ORIGINAL SIGNATURES, NOT COPIES OR STAMPS OF SIGNATURES.
 THE ABOVE FORMS WILL BE SIGNED BY THE ADE/CNU DIRECTOR, SUZANNE DAVIDSON.
 ONE SIGNED COPY WILL BE RETURNED TO THE SCHOOL DISTRICT FOR DISTRICT RECORDS.

Return completed materials by **MAY 12, 2017**
 ADE CNU • 2020 West 3rd Street, Suite 404 • Little Rock AR 72205

Date
Received
at CNU